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VIA ECFS

Ms. Marlene H. Dortch
Secretary
Federal Communications Commission
445 12th Street, S.W.
Washington, D.C. 20554

**Re: *Ex Parte Comments*
In the Matter of Updating the Inter-carrier Compensation Regime to
*Eliminate Access Arbitrage, WC Docket No. 18-155***

Dear Ms. Dortch:

We are representatives of national organizations that support the mental, emotional, and physical well-being of American citizens as well as researchers that work to improve the delivery of healthcare and social services, including to America's rural and underserved populations. We write to express our concerns regarding the Commission's proposed rules in Docket No. 18-155, which threaten to eliminate free conference calling services based on a belief that long-distance carriers, like AT&T and Verizon, should not have to deliver the calls their customers make to these free services.

We write to express our unanimous view that free conference calling services have had a profoundly-positive impact on the health of many Americans and to express our belief that the Commission's proposed rules, if adopted, will have significant and costly negative consequences on these same individuals.

Indeed, years of research support our concerns. The efficacy of conference calls to conduct supportive-expressive group therapy ("SEGT") has been well documented over many years. This research establishes that conference call-based SEGT improves relationships with family members, friends, and physicians and enables individuals to "express feelings about important existential issues, such as death, isolation, and loss of freedom," which are "issues likely to affect many persons living with a chronic illness."¹ The use of teleconferences for SEGT "can overcome geographic isolation" and, unlike Internet-based groups, does not restrict individuals

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See generally, e.g., Timothy G. Heckman et al., Supportive-Expressive and Coping Group Teletherapies for HIV-Infected Older Adults: A Randomized Clinical Trial, AIDS & BEHAV., Nov. 2013, at 3034-44.

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from participating due to a “[l]ack of computer resources [and] skills.”² Research confirms that the “telephone [conference] is an effective and feasible means of delivering a group to both rural and sick [individuals]” “who may be doubly isolated by their illness and their geographic location,” thus requiring “access to psychological support.”³

2

H. Sharon Campbell, et al., *Cancer Peer Support Programs – Do They Work?*, 55 PATIENT EDUC. & COUNSELING 3, 3 (2004).

3

Mary O’Brien et al., *Supportive-Expressive Group Therapy for Women with Metastatic Breast Cancer: Improving Access for Australian Women Through Use of Teleconference*, 8 COUNSELLING & PSYCHOTHERAPY RES. 28, 28 (2008).

2

Research has confirmed the impact of teleconference group therapy for a diverse array of patients, including, but not limited to: the physically disabled elderly,⁴ visually impaired elderly,⁵ women with breast cancer,⁶ African American women with breast cancer,⁷ HIV-infected children and their families,⁸ women in rural areas confronting obesity,⁹ multiple sclerosis patients struggling to manage fatigue,¹⁰ women in rural areas diagnosed with metastatic breast cancer,¹¹ and an array of other cancer patients who are constantly in need of social support.¹² Moreover, conference calls often play a critical role in twelve-step addiction treatment programs, such as Alcoholics Anonymous, Al-Anon/Alateen, and Overeaters Anonymous.¹³ Like the health issues they confront, teleconference-based support groups impact the lives of men and women of all racial and ethnic groups in every corner of our country, without regard to privilege or power.

4

See generally, e.g., Ron L. Evans et al., *Cognitive Telephone Group Therapy with Physically Disabled Elderly Persons*, 26 GERONTOLOGIST 8 (1986).

5

See generally, e.g., Ron L. Evans & Beth M. Jaureguy, *Group Therapy by Phone: A Cognitive Behavioral Program for Visually Impaired Elderly*, 7 SOC. WORK HEALTHCARE 79 (1982).

6

See generally, e.g., Sue P. Heiney et al., *Evaluation of a Therapeutic Group by Telephone for Women with Breast Cancer*, 21 J. PSYCHOSOCIAL ONCOLOGY 62 (2003).

7

See generally, e.g., Sue P. Heiney et al., *Randomized Trial of Therapeutic Group by Teleconference: African American Women with Breast Cancer*, CANCER, Aug. 2012, at 3822-32.

8

See generally, e.g., Lori S. Wiener, *National Telephone Support Groups: A New Avenue Toward Psychosocial Support for HIV-Infected Children and Their Families*, 16 SOC. WORK GRPS. 55 (1993).

9

See generally, e.g., Christie A. Befort et al., *Group Versus Individual Phone-Based Obesity Treatment for Rural Women*, 11 EATING BEHAVS. 11 (2010).

10

See generally, e.g., Marcia Finlayson et al., *Randomized Trial of a Teleconference-Delivered Fatigue Management Program for People with Multiple Sclerosis*, 17 MULTIPLE SCLEROSIS J. 1130 (2011).

11

See generally, e.g., O'Brien, *supra* note 3.

12

See generally, e.g., Campbell, *supra* note 2.

13

See generally, e.g., Shelley J. Korshak & Santiago Delboy, *Complementary Modalities: Twelve-Step Programs and Group Psychotherapy for Addiction Treatment*, 37 GROUP 273 (2013).

Researchers have correctly observed that the effectiveness of conference call-based SEGT is contingent upon access to conference call services being affordable. For example, one early study noted that “[p]erhaps the most important practical consideration to [telephone conferences] is cost.”¹⁴ The study detailed how, at that time, AT&T charged the care provider who facilitated the group sessions a fee of “49 cents for one minute of conference time per person,” plus a per-person set-up charge of \$3.50.¹⁵ While the charges AT&T bills for conference calling have no doubt declined in the intervening years, the introduction of free conference calling, in which each individual uses their existing long-distance service to access the call (rather than pay a separate charge), has helped to ensure broad and equal access to conference calls for the delivery of emotional and mental medical care and addiction treatment for chronic patients.

Our review of the record that is being developed in Docket No. 18-155 shows just how critical free conference calls are to countless citizens throughout the nation as they try to recover, both physically and emotionally, from injury, illness, or addiction:

In her comments, Nancie B. of Fair Oaks, California, classified the FCC’s proceeding in WC Docket No. 18-155 as creating a “major health concern”:

My free conference calling services are currently at risk of being completely eliminated and costing me, millions of others and our businesses. Peoples’ HEALTH may be in jeopardy. [] The conference especially of concern are our 12-step RECOVERY calls. **This service is a LIFELINE for millions. We have shut-ins, people of low-income, without mobility, computers, friends, family. This is their PRIMARY support and contact with other human beings....** [Is it] [f]air to squeeze our poor, our disabled, our sick, to line the pockets of the ALREADY rich[]? I am one that says NO this is NOT fair or just in our US. Please help!! Thank you.

Padma D. of Bat Cave, North Carolina, acknowledges that she would suffer “great hardship” if the Commission forced her to pay for access to conference calls:

I am living on a small Social Security benefit and attend at least one No Cost Conference call a day. **I would experience great hardship if I had to go to pay for these 12 step meetings and other meetings that I attend.** These no cost conference calls are very important for my sanity and happiness. Thank you for not making any changes in the current system.

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Wiener, *supra* note 8.

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Id.

Lauren F. of Susquehanna, Pennsylvania, describes free conference calls as "critical" to the twelve-step program:

Please continue the no cost conference line for those not able to attend recovery meetings. **This service is critical to many of our members, especially those who are house bound or have very long distances to travel for face to face meetings.** Your help in keeping these meetings available at no cost is critical. Thank you in advance for your kind consideration.

And, like Lauren F., Sharon F. of Blue Springs, Missouri, finds free conference calls to be extremely "valuable" given her precarious situation:

I am disabled. I use free conferencing calls as a way to supplement my therapy. My carrier, Verizon, charges me for unlimited calling. Calling into 12 step or other support groups should not cost me more than what I already pay. **These free conference calls are valuable to me, as well as thousands of other Americans who can't drive or afford to seek services outside the home.**

Suzanne G. of Winter Park, Florida, goes so far as to state that free conference calls have saved her life:

Conference calling saves my life and the lives of countless other taxpayers and voters. I beg you to please reconsider acting on WC Docket No. 18-155. My free conference calling services are currently at risk of being completely eliminated and costing me [and] millions of others IN DESPERATE NEED OF THESE SERVICES. I am writing to urge you to refrain from eliminating services that I and MANY other Americans use daily [OR] SEVERAL TIMES A DAY JUST TO SURVIVE.... MANY USERS ARE SHUT-INS OR WITH HEALTH CRISIS OR SIMPLY UNABLE TO GET OUT AND CONNECT TO OTHERS SUFFERING THE SAME WAY.... **MANY ON FIXED INCOMES cannot afford the increases.**

Scott K. of Great Neck, New York, points out that free conference calls are "invaluable" to him and millions of other Americans:

Free conference calling has proven invaluable to the 12-step community – of which I am a member – and **without it, countless people who cannot afford paid conference calling will lose the help that they need which will result in needless suffering and death.** Please don't end free conference calling.

And Elly P. of Fort Lauderdale, Florida, reminds the Commission that it is not just patients who rely on free conference calling services, but also those non-profit organizations that provide these services day-in and day-out:

Free conference calling services are **essential to [] small non-profit organization[s]** such as Florida Agencies Serving the Blind, which regularly holds meetings with the member non-profits throughout the State.

Indeed, the comments of Terry M. of Goldvein, Virginia, summarize the above points well:

I strongly urge you to allow the free conference calling lines to remain free. As a citizen not only myself, but many many others I know have benefitted tremendously and in myriad ways from 12 step support meetings and various other support communities offered by this service. **They have offered me physical, mental, emotional and spiritual support on a daily basis for years, and [I] am certain they have done the same for others.** Their value is tremendous and doesn't just benefit each individual alone (and they have literally saves the lives of some!) but also benefit communities, families, employers, neighbors and the population as a whole. Without the calls being free many will have no access at all to these vital resources and human connections. Please allow them to continue.

As the above comments show, free conference calling plays a critical role in our effort to support the mental, emotional, and physical well-being of American citizens everywhere.

We urge the Commission to reevaluate its proposal and refrain from adopting any new rules that would have the effect of jeopardizing the valuable free conference calling services that so many Americans have come to rely upon.

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